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## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:	226
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Total Fee Calculation									
	Fee Code	Total # Claims	Number Extra X	Fcc	Fee		Total		
,	Sm./Lg.			Sm. Entity	Lg. Entity				
Basic Filing Fee	201/101						·240		
Total Claim; >20	203/103	<u>49</u> -20 •	<b>≥</b> x		8		2		
Independent Claims >3	202/102	.3 •	<u></u> ч		28		210		
Mult. Dep Claim Present	204/104					3			
Surcharge	205/105				1385	9	130		
English Translation	139								
TOTAL FEE CALCULA	ATION						<u>123-</u>		
Fees due upon filing t	he application.								
Total Filing Fees Due		724.A							
Less Filing Fees Subm	nitted - \$								
BALANCE DUE Office of Initial Patent	= \$ <u>1/2</u>	3-1.50							

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application	or	Docket	Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE OR		OR	OTHER THAN SMALL ENTITY			
FOR NUMBER FILED			NUMBER	EXTRA	RATE	FEE	1	RATE	FEE		
BASIC FEE								380.00	OR		760.00
TOTAL CLAIMS minus 20= *						X\$ 9=		OR	X\$18=	رجي	
INC	EPENDENT CL	AIMS	-	minus	3 = *		X39=		OR	X78=	استدات
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		ОR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	,5571	
	С	LAIMS (Colu		MENDED	- PART II (Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL	
ENT A		CLA REMA	IMS INING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş.	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*		Minus	***	=	X39=		OR	X78=	
H	FIRST PRESE	NIAIIO	N OF MI	JLTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=	
				TOTAL ADDIT, FEE		OR	TOTAL ADDIT FEE				
ı		(Colu	mn 1)	-6.	(Column 2)	(Column 3)	7.0011.122		•		
ENT B		REMA AF	IMS INING TER OMENT	ine ve	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
¥	Independent	*		Minus	***	=	X39=		OR	X78=	
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	+260=	
							TOTAL ADDIT, FEE		OR	TOTAL ADDIT FEE	
		(Colu	mn 1)		(Column 2)	(Column 3)					
AMENDMENT C	4.6	REMA AF	IMS INING FER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
¥	Independent	*		Minus	***	=	X39=		OR	X78=	
Ľ	FIRST PRESE	NTATIO	N OF M	JLTIPLE DEF	PENDENT CLAIM		+130=	-	On		
١.	<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3</li> </ul>								OR	+260=	
	If the "Highest Nu	mber Pre	viously Pa	aid For IN THI	S SPACE is less that	an 20, enter "20 "	ADDIT FEE		OR	TOTAL ADDIT FEE	L
"	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										